

Work Order ID 107196

107196

Page 1

September-23-13 11:20:09 AM

Item ID: D3488-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Stop

NS2

Item Name: Blade Fitting LH

Start Date: 9/23/13 Start Qty: 12.00

12

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:

Process Plan:

R

Date: 13-09-23

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D3488	Rev B
DSK101	REV D

100	0.00
100	DOOSAN LATHE

Doosan	Memo	0.00
Doosan Lathe	1-Turn as per Dwg DSK 101 & Folio FA625	13-11-11

2-Deburr

110	0.00
110	QC2- Inspect parts off machine FAI/FAIB

QC	Memo	0.00
Quality Control	13-11-11	12

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>							
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>							
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>							
	Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>							
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	<input type="checkbox"/>							
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	<input type="checkbox"/>							
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	<input type="checkbox"/>							
				<input type="checkbox"/>							
				<input type="checkbox"/>							
				<input type="checkbox"/>							

Work Order ID 107196***107196***

Page 2

September-23-13 11:20:09 AM

Item ID: D3488-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Blade Fitting LH

Stop

NS2

Start Date: 9/23/13 Start Qty: 12.00

12

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* HAAS 1	HAAS CNC VERTICAL MACHINING #1 Memo HAAS CNC vertical machine #1	0.00				12	0		SL 13-11-19
130 *130* QC Quality Control	QC2- Inspect parts off machine FAI/FAIB Memo	0.00				12	0		SL 13-11-19
140 *140* QC Quality Control	QC8- Inspect parts - second check Memo	0.00				12	0		
			01/11/20						

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector	
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear	General											
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>					Pressure/Forced <input type="checkbox"/>			
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>					Temperature/Cure <input type="checkbox"/>			
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>					Weld <input type="checkbox"/>			
	Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>					Wrong Stock Pulled <input type="checkbox"/>			
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>								
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>								
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									

Work Order ID 107196

107196

Page 3

September-23-13 11:20:09 AM

Item ID: D3488-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Blade Fitting LH

Stop

NS2

Start Date: 9/23/13 Start Qty: 12.00

12

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150 *150* HandFinish	Chemical Conversion Coat per QSI005 4.1 M 126 804	0.00				12	0	CF	13-11-21
Hand Finishing	Memo	0.00							
160 *160* Powdercoat Powder Coating	White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum M 126 804	0.00				10	0	13-11-21	DAS 34 9-89
	Memo	0.00							
	START TIME: <u>3:40</u>	OVEN TEMPERATURE: <u>470</u>							
	FINISH TIME: <u>5:00</u>								
170 *170* QC Quality Control	QC3- Inspect Part Finish M 126 804	0.00				10	0	13-11-21	19
	Memo	0.00							

NCR: Yes / No

DQA: Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>							
Root Cause Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>		Date	Step			Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
FAULT CATEGORY													
Landing Gear Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube <input type="checkbox"/>				General Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>		Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>				Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>		Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> <input type="checkbox"/> Other	

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld						
	Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other						
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>								
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

Work Order ID 107196

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September-23-13 11:20:09 AM

Item ID: D3488-041 Accept *N900040100* Setup Start *NS1*

Revision ID:

Item Name: Blade Fitting LH

Start Date: 9/23/13 Start Qty: 12.00 *12*

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 12.00 *12*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210 *210* QC Quality Control	QC21- Final Inspection - Work Order Release	0.00							<i>13/12/30</i>
	Memo	0.00							<i>MF 13/12/30</i>

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS									
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>								
Part No. _____															
NCR No. _____															
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear				General											
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio						<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
														<input type="checkbox"/> Other	

Picklist Print

September-23-13 11:20:09 AM

Page 1 / 1

Work Order ID: 107196 **Start Date:** 9/23/13 **Required Date:** 9/23/13
Parent Item: D3488-041 **Start Qty:** 12.00 **Required Qty:** 12.00
Parent Item Name: Blade Fitting LH

Comments: IPP Rev:A New Issue 06-02-28 JLM
IPP Rev:B As per Rev B 06-03-30 JLM
IPP Rev:C Now On Doosan Lathe JLM Verified BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS7-1032-225 Insert	X	Purchased	No				Each	386.0000					
							<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>				
				FG			100						
				118520			100						
				FP001			11						
				118520			6						
				122290			5						
				ST281			275						
				100896			135						
				122333			140						
96103-003 Round Billet, Aluminum		Manufactured	No				Each	22.0000		12			
				<u>Location</u>			<u>Loc Qty</u>		<u>Loc Code</u>				
				MAT043			22						
				95020			4						
				96416			2						
				99312			8						
				99651			8						

108417

12

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear	General									
	Bending <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld						
	Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other						
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>								
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>								
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>								
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>								

DART AEROSPACE LTD		Work Order:	167196
Description: Blade Fitting, LH / Turning Detail for D3488-1/-2		Part Number:	D3488-1
Inspection Dwg: D3488 / DSK101	Rev: B / D		Page 1 of 2

FIRST ARTICLE INSPECTION CHECKLIST

First Article Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Lathe Section						
Ø2.150	+/-0.005	2.149	/			
Ø2.780	+/-0.005	2.280	/			
Ø3.125	+/-0.010	3.123	/			
Ø3.346	+/-0.010	3.345	/			
0.125 x 45°	+/-0.010 x +/-0.1°	125X45°	/			
8.000	+0.030/-0.000	8.015	/			
9.250	+/-0.010	9.250	/			
0.188	+/-0.010	187	/			
R0.032	+/-0.010	R.032	/			
R0.062	+/-0.010	R.060	/			
Ø0.297	+0.005/-0.001	297	/			
Ø0.430	+/-0.010	432	/			
0.100	+/-0.010	100	/			
0.125	+/-0.010	130	/			
2.620	+/-0.010	2.620	/			
3.500	+/-0.010	3.500	/			
1.005	+/-0.010	1005	/			
Ø0.484	+0.005/-0.001	484	/			
1.180	+/-0.010	1.180	/			
3.150	+/-0.010	3.150	/			
3.070	+/-0.010	3.070	/			
R0.063	+/-0.010	R.060	/			

21 13-1110

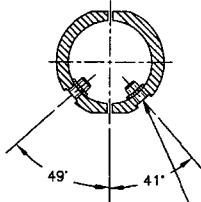
-254
-063

DART AEROSPACE LTD		Work Order:	107186
Description: Blade Fitting, LH / Turning Detail for D3488-1/-2		Part Number:	D3488-1
Inspection Dwg: D3488 / DSK101	Rev: B / D		Page 2 of 2

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Milling Section						
Ø0.508	+0.006/-0.001	.508	✓		Vern	SL-10
0.750	+/-0.010	.751	✓		H-Go	
1.500	+/-0.010	1.500	✓		Vern	"
11.18	+/-0.030	11.173	✓		H-G	
R0.062	+/-0.010	.062	✓		R-G	
0.125	+/-0.010	.121	✓		Vern	"
0.590	+/-0.010	.589	✓		H-Go	
0.793	+/-0.010	.790	✓		"	
1.351	+/-0.010	1.354	✓		"	
1.317	+/-0.010	1.317	✓		Vern	"
1.802	+/-0.010	1.804	✓		H-Go	

Measured by:	SL	Audited by:	mf	Prototype Approval:	N/A
Date:	13-11-19	Date:	13/11/20	Date:	N/A

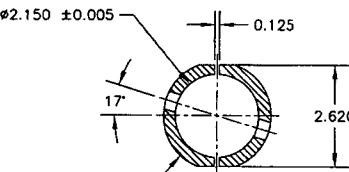
Rev	Date	Change	Revised by	Approved
A	06.03.31	New Issue	KJ/JLM	
B	08.09.19	Reformat P/O D3488-041	KJ/JLM	
C	08.12.02	Dimension 8.000 removed	KJ/JLM	SL



SECTION B-B

0.297
C'BORE Ø.430 x 0.100
INSTALL ALS4-1032-225 (OR AKS4-1032-225)
OR ALS7-1032-225 OR AKS7-1032-225)
INSERTS AFTER FINISH
(4 PLACES)

4



SECTION A-A

D3488-041/-042 BLADE FITTING ASSEMBLY PARTS LIST

QTY	QTY	PART NUMBER	DESCRIPTION
-041	-042	D3488-041	BLADE FITTING ASSEMBLY (LH)
	X	D3488-042	BLADE FITTING ASSEMBLY (RH)
1		D3488-1	BLADE FITTING (LH)
	1	D3488-2	BLADE FITTING (RH)
4	4	ALS4-1032-225 or AKS4-1032-225 or ALS7-1032-225 or AKS7-1032-225	INSERT

D3488-041/-042 BLADE FITTING

1) MATERIAL: MAKE D3488-1/-2 FROM ALUMINUM 7075-T7351 ROUND BAR
PER QQ-A-225/9
(REF. DART MATERIAL SPEC M7075T73R)

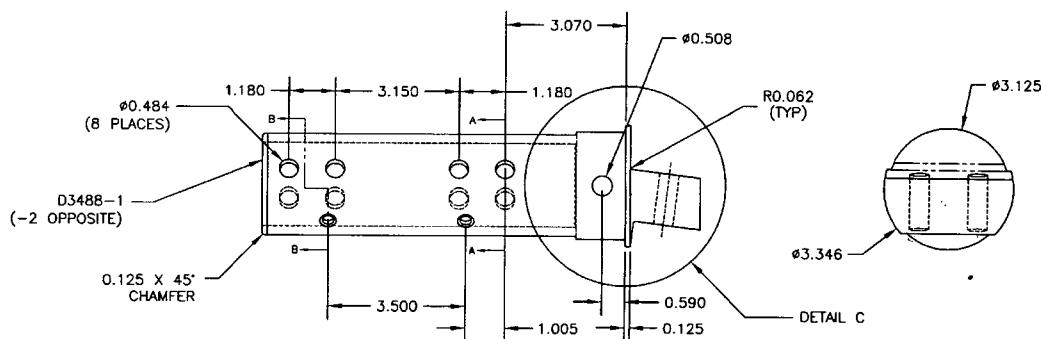
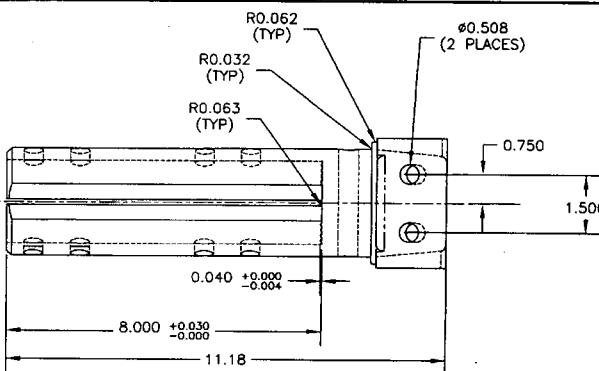
2) FINISH: ACID ETCH, ALODINE PER DART QSI 005 4.1.
POWDER COAT WHITE (REF 4.3.5.1) PER DART^{*} QSI 005 4.3

3) BREAK UNMARKED SHARP EDGES 0.010 TO 0.020

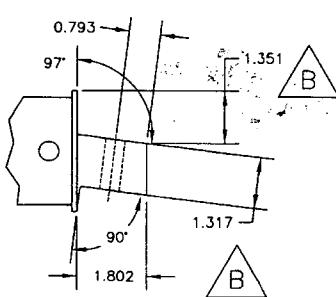
4) INSTALL INSERTS AFTER POWDER COAT

5) ALL DIMENSIONS ARE IN INCHES

6) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED



D3488-041 SHOWN (D3488-042 OPPOSITE)

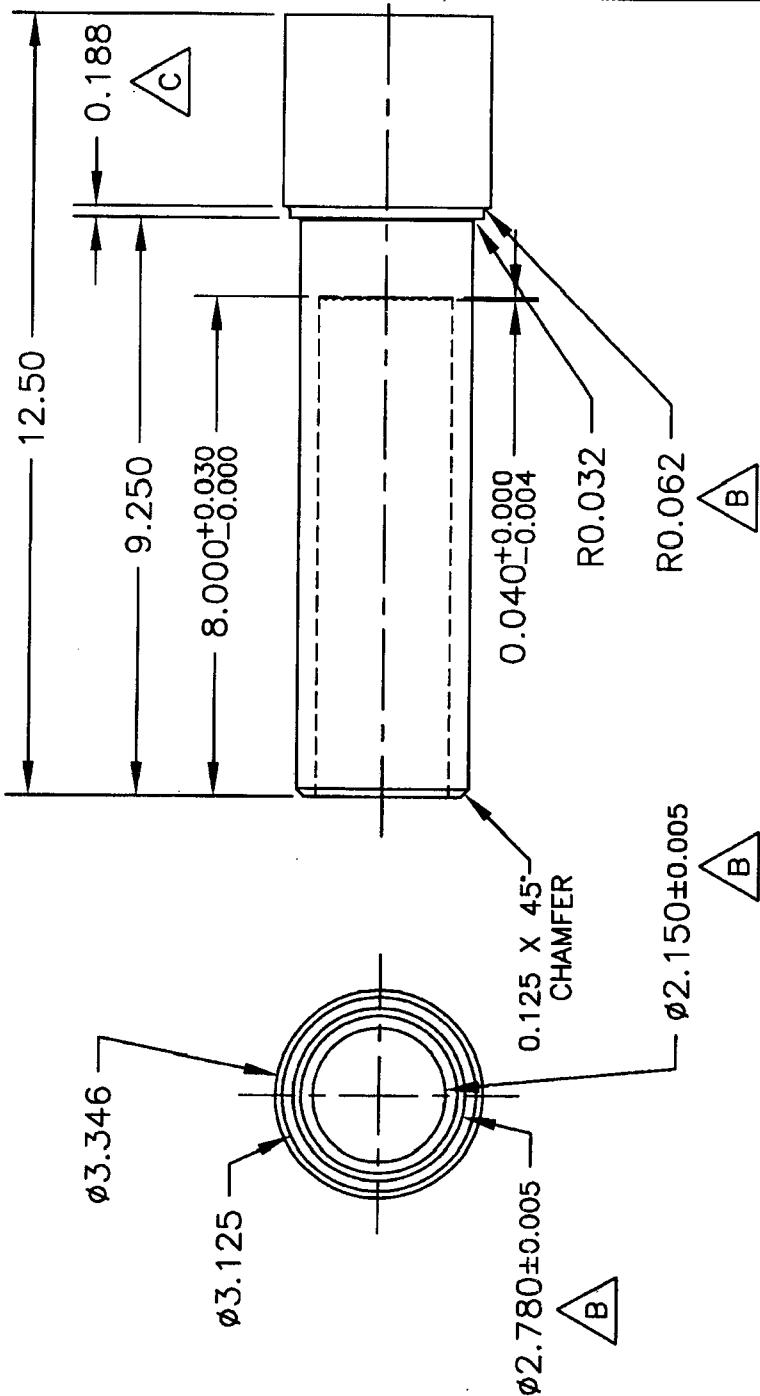


DETAIL C

COPYRIGHT © 2005 BY DART AEROSPACE USA, INC.	DESIGN	PH	DRAWN BY	PH	DART	DART AEROSPACE USA, INC.
					PORT HADLOCK, WA	
CHECKED	APPROVED	DRAWING NO.			REV. B	
		D3488			SHEET 1 OF 1	
DATE	TITLE			SCALE		
06.03.15	BLADE FITTING			1:3		

DART

DESIGN PH	DRAWN BY PH	DART AEROSPACE USA, INC. PORT HADLOCK, WA	
CHECKED <i>MM</i>	APPROVED <i>MM</i>	DRAWING NO. DSK 101	REV. D SHEET 1 OF 1
DATE 06.05.09	TITLE D3488-1/-2 TURNING DETAIL		SCALE 1:3
A	05.12.21	NEW ISSUE	
B	06.03.02	ADD TOLERANCES AND RADIUS	
C	06.04.17	0.188 WAS 0.125	
D	06.05.09	REMOVE DIAMETER FOR CHAMFER	



DSK 101

- 1) MATERIAL: MAKE FROM ALUMINUM 7075-T7351 ROUND BAR PER QQ-A-225/9
(REF. DART MATERIAL SPEC M7075T73R)
NONE
- 2) FINISH: NONE
- 3) BREAK UNMARKED SHARP EDGES 0.010 TO 0.020
- 4) ALL DIMENSIONS ARE IN INCHES
- 5) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED

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